

**DECLARATION AND POWER OF ATTORNEY
IN PATENT APPLICATION**

PATENT

Attorney Docket No.: 2269-11-3

As a below named inventor, I hereby declare:

My residence, post office address and citizenship are as stated below next to my name.

I believe that I am the original, first and sole inventor (if only one name is listed below) or a joint inventor (if plural inventors are listed below) of the subject matter that is claimed and for which a patent is sought on the invention entitled:

FORMING OF CLOSE THIN TRENCHES

the specification of which

- ☒ is attached hereto.
- ☐ was filed on _____ as U.S. Application Serial No. _____ (or PCT International Application No.) _____ and was amended on _____ (if applicable) (if not present when this instrument is executed, applicants' attorney or agent is authorized to enter the application serial number and filing date upon receipt of the same from the United States Patent and Trademark Office).

I hereby state that I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in Title 37, Code of Federal Regulations, Section 1.56.

I hereby claim foreign priority benefits under Title 35, United States Code, Section 119(a)-(d) or Section 365(b), of any foreign application(s) for patent or inventor's certificate, or Section 365(a) of any PCT international application designating at least one country other than the United States listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed.

<u>Number</u>	<u>Country</u>	<u>Date Filed</u>	<u>Priority Claimed</u>
<u>02/14460</u>	<u>FRANCE</u>	<u>19 NOVEMBER 2002</u> <u>Day/Mo/Year</u>	<u>Yes</u> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<u> </u>	<u> </u>	<u> </u> <u>Day/Mo/Year</u>	<u> </u> <input type="checkbox"/> Yes <input type="checkbox"/> No

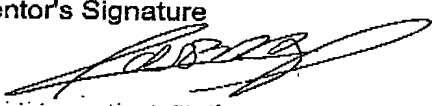
Application No. _____ Filing Date _____

<u>Application Number</u>	<u>Filing Date</u>	<u>Status: Patented/ Pending/Abandoned</u>

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I hereby further declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

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